Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 1 of 68

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA (ALEXANDRIA DIVISION)		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Oscar First name R	Kimberly First name A
		Middle name	Middle name
	Bring your picture identification to your	Romero-Marvez	Chan
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2148	xxx-xx-3385

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 2 of 68

Debtor 1 Oscar R Romero-Marvez
Debtor 2 Kimberly A Chan

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	1020 S Quebec St, Apt 3			
		Arlington, VA 22204 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Arlington			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 3 of 68

_		scar R Romero-l imberly A Chan	Marvez				Case number (if known)	
Par	t 2: Te	II the Court About \	Your Bank	ruptcy Ca	ase			
7.	The cha	apter of the ptcy Code you are	Check on	e. (For a l	orief description	of each, see <i>Notice Required</i> page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuate box.	uals Filing for Bankruptcy
	choosir	ng to file under	■ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			☐ Chap	ter 13				
8.	How yo	u will pay the fee	abo ord	out how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee	heck with the clerk's office in you e yourself, you may pay with casl behalf, your attorney may pay wit	h, cashier's check, or money
						tallments. If you choose this one of the control of	option, sign and attach the Applic	ation for Individuals to Pay
			☐ I re but app	equest that is not required to so	at my fee be wa juired to, waive y ur family size ar	lived (You may request this or your fee, and may do so only in ad you are unable to pay the fe	otion only if you are filing for Chal f your income is less than 150% se in installments). If you choose Official Form 103B) and file it with	of the official poverty line that this option, you must fill out
9.	Have yo	ou filed for	■ No.					
	bankruj last 8 ye	otcy within the ears?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		bankruptcy ending or being	■ No					
	filed by not filin you, or	a spouse who is g this case with by a business , or by an	☐ Yes.					
				Debtor			Relationship to	you
				District		When	Case number, if	
				Debtor			Relationship to	
				District		When	Case number, if	known
11.	Do you residen	rent your	■ No.	Go to I	line 12.			
	TOSIGOTI		☐ Yes.	Has yo	our landlord obta	ained an eviction judgment aga	ainst you?	
					No. Go to line	12.		

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Debtor 1 Oscar R Romero-Marvez

Deb	otor 2 Kimberly A Chan				Case number (if known)			
Par	Report About Any Bu	ısinesses	You Owr	ı as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	f you are filing under Chapter 11, the court must know whether you are a small business debtor so that deadlines. If you indicate that you are a small business debtor, you must attach your most recent balar operations, cash-flow statement, and federal income tax return or if any of these documents do not eximate the statement of the second of the sec					
	For a definition of small	■ No.	I am ı	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			
						_		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 5 of 68

Debtor 1 Oscar R Romero-Marvez
Debtor 2 Kimberly A Chan

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 6 of 68

Debtor 1 Oscar R Romero-Marvez Debtor 2 Kimberly A Chan Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. 16a. individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Oscar R Romero-Marvez /s/ Kimberly A Chan Oscar R Romero-Marvez Kimberly A Chan Signature of Debtor 1 Signature of Debtor 2 Executed on October 25, 2019 Executed on October 25, 2019

MM / DD / YYYY

MM / DD / YYYY

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 7 of 68

Debtor 1	Oscar R Romero-I	Document Marvez	Page 7 of 68		
Debtor 2	Kimberly A Chan			Case number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ted States Code, and ha	ave explained the relief a	available under each chapter
•	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no	knowledge after an inqui	ry that the information in the
		/s/ Tommy Andrews, Jr. VA Bar #	Date	October 25, 20)19

, o, . o ,		0 010.00. =0, =0.0	
Signature of Attorney for Debtor		MM / DD / YYYY	
Tommy Andrews, Jr. VA Bar # 28544			
Tommy Andrews, Jr., P.C.			
122 North Alfred Street Alexandria, VA 22314			
Number, Street, City, State & ZIP Code			
Contact phone 703.838.9004	Email address		
VA Bar # 28544 VA			
Bar number & State			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 8 of 68

31	l in this inforn	nation to identify you	r case:			
De	ebtor 1	Oscar R Romero	D-Marvez Middle Name	Last Name		
De	btor 2	Kimberly A Cha		Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA (ALEXANDRIA	DIVISION)	
Ca	ise number					
	nown)					Check if this is an amended filing
St		of Financial		viduals Filing for	Bankruptcy re equally responsible for su	4/19
info nur	ormation. If m	ore space is needed, n). Answer every que	attach a separate sheet	to this form. On the top of a	ny additional pages, write y	
1.		r current marital statu		od Elved Belole		
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other tha	an where you live now?		
	□ No ■ Yes. Lis	t all of the places you l	ived in the last 3 years. Do	o not include where you live no	ow.	
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
		mount Ct #10 e, VA 22003	From-To:	■ Same as Debto	r 1	■ Same as Debtor 1 From-To:
3. sta	tes and territori	es include Arizona, Ca		Nevada, New Mexico, Puerto	inity property state or territo Rico, Texas, Washington and	
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	u received from all jobs an	ating a business during this and all businesses, including pactive together, list it only once		endar years?
	□ No ■ Yes, Fill	I in the details.				
	· · · ·		Dahtan 4		Dahtan 0	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips		■ Wages, commissions, bonuses, tips	\$39,328.00
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		, ,	Affairs for Individuals Filing for		page '

page 1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Debtor 1 Oscar R Romero-Marvez

Debtor 2 K	imberly A Ch	an	Case number (if known)					
		Dob	tor 1		Debtor 2			
		Sou	rces of income ck all that apply.	Gross income (before deductions and exclusions)	Sources of inco			
For last cale (January 1 t	endar year: o December 31		Vages, commissions, uses, tips	\$53,900.00	■ Wages, combonuses, tips	missions, \$41,746.00		
			perating a business		Operating a l	ousiness		
	ndar year befor o December 31	2017 \	Vages, commissions, uses, tips	\$55,900.00	■ Wages, combonuses, tips	missions, \$32,000.00		
			perating a business		Operating a l	ousiness		
■ No	n source and the		·	tely. Do not include income	that you listed in lin	e 4.		
		Sour	rces of income cribe below.	Gross income from each source (before deductions and exclusions)	Sources of incontrol Describe below.			
Part 3: Li	st Certain Payn	nents You Made	Before You Filed for	Bankruntcy				
□ No.	 No. Neither Debtor 1 nor Debtor 2 individual primarily for a personal puring the 90 days before you follow No. Go to line 7. Yes List below each crepaid that creditor. Donot include payment * Subject to adjustment on 4/01 Yes. Debtor 1 or Debtor 2 or both following the 90 days before you follow No. Go to line 7. Yes List below each cre 			Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,825* or more the for domestic support oblinis bankruptcy case. Is after that for cases filed or imer debts. d you pay any creditor a total d a total of \$600 or more and the purpose.	al of \$6,825* or mor in one or more pay gations, such as ch or after the date of al of \$600 or more?	ments and the total amount you ild support and alimony. Also, do f adjustment.		
Credito	r's Name and A	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for		
P.O. B	nancial ox 78143 ix, AZ 85062		Last 90 days	\$965.00	\$48,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 10 of 68

		0	Document	Page 10 of 68	3		
	otor 1 otor 2	Oscar R Romero-Marvez Kimberly A Chan		Cas	se number (if known)		
		Minderly A Ghan			,		
	Cred	itor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Attn 201	erican Honda Finance : Bankruptcy Little Falls Dri. nington, DE 19808	Last 90 days	\$556.00	\$27,752.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other	ard payment
	Attn 120	folio Recovery : Bankruptcy Corporate Blvd old, VA 23502	Last 90 days	\$728.00	\$728.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other_	ard payment
7.	Inside of whi	n 1 year before you filed for bankrupers include your relatives; any general pech you are an officer, director, person in ness you operate as a sole proprietor.	partners; relatives of any go in control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations agent, including one for
		No Yes. List all payments to an insider.					
	Insid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside	n 1 year before you filed for bankruper? e payments on debts guaranteed or co		ayments or transfer a	any property on a	ccount of a d	ebt that benefited an
		No Yes. List all payments to an insider					
	Insid	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4:	Identify Legal Actions, Repossession	ons. and Foreclosures				
9.	Within List all modifi	n 1 year before you filed for bankrup I such matters, including personal injur cations, and contract disputes. No Yes. Fill in the details.	otcy, were you a party in a				
	Case Case	title number	Nature of the case	Court or agency		Status of th	ne case
10.	Check	n 1 year before you filed for bankrup all that apply and fill in the details below. So. Go to line 11. Yes. Fill in the information below.		perty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
		itor Name and Address	Describe the Property	V	Date		Value of the
	J. 04		Explain what happen		Date		property

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 11 of 68

Del	otor 2 Kimberly A Chan	Case number	(if known)	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.	uptcy, did any creditor, including a bank or financial ins cause you owed a debt?	stitution, set off any a	nmounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes	tcy, was any of your property in the possession of an a another official?	assignee for the bene	efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions			
13.	■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	ptcy, did you give any gifts with a total value of more the	Dates you gave	? Value
	Person to Whom You Gave the Gift and Address:		the gifts	
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co	ptcy, did you give any gifts or contributions with a tota	Il value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	·	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	or gambling? ■ No □ Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose anyt		
	how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p	tcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? eparers, or credit counseling agencies for services required	,, ,	rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Tommy Andrews, Jr., P.C. 122 North Alfred Street Alexandria, VA 22314		10/19	\$1,380.00
	Debt Education and Certification		10/19	\$20.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 12 of 68

Debtor 1 Oscar R Romero-Marvez
Debtor 2 Kimberly A Chan

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list	or to make payments to your credit		transfer any propert	y to anyone who
	■ No				
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any protransferred	operty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list No	ness or financial affairs? as security (such as the granting of a			
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value of property transferred		ny property or eceived or debts hange	Date transfer was made
	Person's relationship to you				
	Bonafide Purchaser	2005 Kawosaki ZX1000	Proceeds	\$2,500	2019
	None				
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		self-settled trus	st or similar device o	f which you are a
	Name of trust	Description and value of the pro	perty transferre	d	Date Transfer was made
Par	rt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit Boxes, and S	torage Units		
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associate	other financial accounts; certificates	s of deposit; sha		
	No Yes. Fill in the details.				
	Name of Financial Institution and La	ast 4 digits of Type of acco count number instrument	clos	e account was ed, sold, red, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for bankruptcy, a	ny safe deposit l	box or other deposit	ory for securities,
	■ No				
	☐ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the co	ontents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you	ı filed for bankruptcy	1?
	No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the co	ontents	Do you still have it?

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 13 of 68

Debtor 1 Oscar R Romero-Marvez
Debtor 2 Kimberly A Chan

Case number (if known)

Par	9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	ou borrowed from, are storing fo	r, or hold in trust
	No Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value
Par	: 10: Give Details About Environmental Inforn	,			
	he purpose of Part 10, the following definitions				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun	_		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law,	whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s was	ste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	y occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e und	er or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	rironn	nental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of	the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, eith	er full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	utive of a corporation			
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Page 14 of 68 Document Debtor 1 Oscar R Romero-Marvez Debtor 2 Kimberly A Chan Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Oscar R Romero-Marvez /s/ Kimberly A Chan Kimberly A Chan Oscar R Romero-Marvez Signature of Debtor 2 Signature of Debtor 1 Date October 25, 2019 Date October 25, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

7 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

	Case	19-13595-KHK	Doc 1	Filed 10		Entered : ae 15 of 6		00:58:26	Des	sc Main
Fill	in this inform	ation to identify your o	case:							
Deb	otor 1	Oscar R Romero-I	Marvez Middle	Name	Last	Name				
	otor 2 use if, filing)	Kimberly A Chan First Name	Middle	Name	Last	Name				
Uni	ted States Ban	kruptcy Court for the:	EASTERN	DISTRICT OF	F VIRGINIA	(ALEXANDRIA	DIVISION)			
Cas (if kn	se number			_						ck if this is an
		m 106Sum f Your Assets a	ınd I iah	nilities an	d Certa	in Statistic	cal Inform	nation		12/15
Be a	ns complete au	nd accurate as possible all of your schedule as, you must fill out a re	le. If two ma	arried people	are filing to e informatio	gether, both a	re equally resp a. If you are fili	onsible for		ng correct
Par	t 1: Summa	arize Your Assets								
										assets of what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Fo	rm 106A/B) om Schedule	e A/B					\$	0.0
	1b. Copy line	e 62, Total personal prop	erty, from S	chedule A/B					\$	84,785.7
	1c. Copy line	63, Total of all property	on Schedul	e A/B					\$	84,785.7
Par	t 2: Summa	arize Your Liabilities								

Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 79,389.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3. 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 45,664.81 Your total liabilities Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 7,366.67 Copy your combined monthly income from line 12 of Schedule I.....

4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I... 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J... \$ 7,366.67

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 16 of 68

Debtor 1 Oscar R Romero-Marvez
Debtor 2 Kimberly A Chan

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 9,781.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

	Cas	G 13-10030-KLIK	Document Page 17 of 68	31/19 00.30.20	Jesc Main
Fill in	this info	ormation to identify your ca			
Debto	or 1	Oscar R Romero-N	larvoz		
Debit	JI 1	First Name	Middle Name Last Name		
Debto	or 2	Kimberly A Chan			
(Spous	e, if filing)	First Name	Middle Name Last Name		
Unite	d States I	Bankruptcy Court for the: _E	EASTERN DISTRICT OF VIRGINIA (ALEXANDRIA DIVIS	SION)	
Case	number				☐ Check if this is an amended filing
Offi	cial F	orm 106A/B			
Scl	hedu	le A/B: Prope	erty		12/15
think it	t fits best. ation. If mer every qu	Be as complete and accurate ore space is needed, attach a estion.	items. List an asset only once. If an asset fits in more than one as possible. If two married people are filing together, both a separate sheet to this form. On the top of any additional page. Land, or Other Real Estate You Own or Have an Interest In	re equally responsible for su	pplying correct
I alt I	. Descrit	e Lacii Residence, Dunding, i	cand, or other real Estate rou own or mave an interest in		
1. Do y	you own o	r have any legal or equitable i	nterest in any residence, building, land, or similar property?		
	No. Go to F	Part 2			
_		e is the property?			
	res. Wilei	e is the property:			
Part 2	Describ	e Your Vehicles			
			able interest in any vehicles, whether they are registeralso report it on Schedule G: Executory Contracts and U		hicles you own that
3. Ca	rs, vans,	trucks, tractors, sport utili	ty vehicles, motorcycles		
		, , ,	•		
1	No				
•	Yes				
3.1	Make:	Honda	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model:	Civic	Debtor 1 only	Creditors Who Have Clair	
	Year:	2018	Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage: 110	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$21,500.00	\$21,500.00
3.2	Make:	Mercedes	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model:	Benz S430	☐ Debtor 1 only	Creditors Who Have Clair	
	Year:	2004	☐ Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage: 1310	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$3,400.00	\$3,400.00

Official Form 106A/B Schedule A/B: Property page 1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 18 of 68

Debtor Debtor		scar R Romero-Marvez imberly A Chan	Cas	e number (if known)	
ı	Make: Model: Year:	Chevrolet Silverado 2018	Who has an interest in the property? Check one Debtor 1 only	the amount of any secur Creditors Who Have Cla	claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
		nate mileage: 8400	_ ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		
			Check if this is community property (see instructions)	\$29,554.00	\$29,554.00
	nples: B		and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle ac		
.pag	es you	have attached for Part 2. Wri	own for all of your entries from Part 2, including any te that number here		\$54,454.00
Do yoι	ı own d	be Your Personal and Household or have any legal or equitable goods and furnishings	d Items interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
\square N	lo	table, desk, d	ens, china, kitchenware e (king), bed complete (sgl), 2 bedroom sets, colining room set, dresser w/ mirror, 2 end tables kitchen items, sofa, 12 pillows, 10 towels		\$9,000.0
Exa	lo	Televisions and radios; audio, vincluding cell phones, cameras scribe 3 tvs, 2 comp	video, stereo, and digital equipment; computers, printers s, media players, games outers, printer, dvds, mp3 player, 2 stereos, 5 nicrowave, 3 game consoles, 3 tablets	s, scanners; music collect	tions; electronic devices
Exa. ■ N	<i>mples: .</i> lo	s of value	gs, prints, or other artwork; books, pictures, or other art c	objects; stamp, coin, or b	aseball card collections;
D. Equi Exal	i pment <i>mples:</i> :	for sports and hobbies	and other hobby equipment; bicycles, pool tables, golf of	clubs, skis; canoes and k	ayaks; carpentry tools;
	30. D 0				
		Drone			\$300.00

Official Form 106A/B Schedule A/B: Property page 2

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 19 of 68

Debtor Debtor			arvez	Case number (if know	vn)
10. Fire					
Exa	amples: Pistols, rifle	s, shotgur	ns, ammunition, ar	nd related equipment	
□ N	o es. Describe				
- '	es. Describe				
		Tauru	s PTIII 9mm		\$150.00
11. Clo t		othes fur	s leather coats d	esigner wear, shoes, accessories	
■ N		ooo, rai	o, routror couto, a	ooignor wour, oness, assessmes	
☐ Ye	es. Describe				
12. Jew	relry				
_Exa	amples: Everyday je	welry, cos	stume jewelry, eng	gagement rings, wedding rings, heirloom jewelry, watches, gem	s, gold, silver
□ N	o es. Describe				
— Y 6	es. Describe				
		weddi	ng ring, 2 wedd	ding bands,	\$15,800.00
-	-farm animals				
Exa	amples: Dogs, cats,	birds, hor	ses		
_	es. Describe				
		two bo	oxer dogs, 1 fis	sh	Unknown
	es. Give specific int			Part 3, including any entries for pages you have attached	
					\$27,750.00
Part 4:	Describe Your Finan	icial Asset	s		
Do you	own or have any l	legal or e	quitable interest	in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cas	h				
Exa	amples: Money you o		•	home, in a safe deposit box, and on hand when you file your pe	etition
- Y (co				
				Cash	\$150.00
Exa	institutions.			ecounts; certificates of deposit; shares in credit unions, brokerages with the same institution, list each.	ge houses, and other similar
□ N				Institution name:	
■ Ye	es			mondation name.	
		17.1.	Checking	Navy Federal	\$499.89
		17.2.	Savings	Navy Federal	\$19.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 20 of 68

Debtor 1 Debtor 2	Oscar R Ro Kimberly A		arvez	Cas	e number (if known)
		17.3.	Checking & Savings	Navy Federal	\$0.18
		17.4.	Checking & Savings	True Energy FCU	\$25.00
Exam			cly traded stocks ent accounts with bro	kerage firms, money market accounts	
■ No □ Yes			Institution or issuer n	ame:	
		otook and	interests in incorne	rated and unincorporated businesses, in	soluding an interest in an LLC partnership and
	venture	Stock and	interests in incorpo	rated and unincorporated businesses, ir	ncluding an interest in an LLC, partnership, and
☐ Yes	. Give specific i		about them me of entity:		of ownership:
Nego	tiable instrumen	ts include ¡	personal checks, cast	iable and non-negotiable instruments niers' checks, promissory notes, and money nsfer to someone by signing or delivering th	
	. Give specific ir	nformation	about them		
	•		uer name:		
	ement or pension oples: Interests in			03(b), thrift savings accounts, or other pensi	ion or profit-sharing plans
■ Yes	. List each acco	•	tely. of account:	Institution name:	
		401(l	k)	Prudential	\$1,887.63
Your <i>Exam</i> ■ No		sed deposi	ts you have made so	that you may continue service or use from a public utilities (electric, gas, water), telecome Institution name or individual:	
23. Annu i	ities (A contract	for a perio	dic payment of mone	y to you, either for life or for a number of year	ars)
■ No	, , , , , , , , , , , , , , , , , , ,	.o. a poo	a.o payo oo	, 10 ,00, 0.1	,
☐ Yes		Issuer nam	ne and description.		
26 U.S	sts in an educa 6.C. §§ 530(b)(1)			alified ABLE program, or under a qualifi	ed state tuition program.
■ No □ Yes		Institution i	name and description	. Separately file the records of any interests	i.11 U.S.C. § 521(c):
25. Trust : ■ No	s, equitable or f	future inte	rests in property (ot	her than anything listed in line 1), and rig	ghts or powers exercisable for your benefit
	. Give specific i	nformation	about them		
				d other intellectual property Is from royalties and licensing agreements	
■ No □ Yes	. Give specific i	nformation	about them		
27. Licen <i>Exan</i>	ses, franchises	s, and othe	er general intangible	s erative association holdings, liquor licenses	, professional licenses
■ No	Civo apocifio i	nformation	about them		

Schedule A/B: Property

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Page 21 of 68 Document Debtor 1 Oscar R Romero-Marvez Debtor 2 Kimberly A Chan Case number (if known) Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No \square Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2.581.70 for Part 4. Write that number here......

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 22 of 68

Debtoi Debtoi		J	Case number (if known)	
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	you have other property of any kind you did not already list? kamples: Season tickets, country club membership			
	No			
	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$0.00
56. P	art 2: Total vehicles, line 5	\$54,454.00	_	
57. P	art 3: Total personal and household items, line 15	\$27,750.00		
58. P	art 4: Total financial assets, line 36	\$2,581.70		
59. P	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$84,785.70	Copy personal property total	\$84,785.70
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$84,785.70

Official Form 106A/B Schedule A/B: Property page 6

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

Fill in this information to identify your case:						
Debtor 1	Oscar R Romero	-Marvez				
	First Name	Middle Name	Last Name			
Debtor 2	Kimberly A Chan					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT C	DF VIRGINIA (ALEXANDRIA	A DIVISION)		
Case number (if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming?	Check one only	, even if	your spouse i	is filing w	vith you.
	_					

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property portion you own Copy the value from Schedule A/B bed complete (king), bed complete (sgl), 2 bedroom sets, coffee table, desk, dining room set, dresser w/ mirror, 2 end tables, 2 floor lamps, kitchen items, sofa, 12 pillows, 10 towels Line from Schedule A/B: 6.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 Check only one box for each exemption. Check only one box for each exemption. Schedule A/B \$9,000.00 100% of fair market value, up to any applicable statutory limit Va. Code 100% of fair market value, up to any applicable statutory limit		
bed complete (king), bed complete (sgl), 2 bedroom sets, coffee table, desk, dining room set, dresser w/ mirror, 2 end tables, 2 floor lamps, kitchen items, sofa, 12 pillows, 10 towels Line from Schedule A/B: 6.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets \$2,500.00 \$1,00% of fair market value, up to any applicable statutory limit Va. Code 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption	
(sgl), 2 bedroom sets, coffee table, desk, dining room set, dresser w/ mirror, 2 end tables, 2 floor lamps, kitchen items, sofa, 12 pillows, 10 towels Line from Schedule A/B: 6.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 to any applicable statutory limit \$2,500.00 \$1,000.00 \$1,000.00 \$1,500.00 \$1,500.00 \$1,500.00 100% of fair market value, up to any applicable statutory limit		
desk, dining room set, dresser w/ mirror, 2 end tables, 2 floor lamps, kitchen items, sofa, 12 pillows, 10 towels Line from Schedule A/B: 6.1 3 tvs, 2 computers, printer, dvds, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 4 100% of fair market value, up to any applicable statutory limit 5 1,000.00 100% of fair market value, up to any applicable statutory limit 7 va. Cod 100% of fair market value, up to any applicable statutory limit	de Ann. § 34-26(4a)	
mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets \$2,500.00 \$2,500.00 \$1,000.00 \$1,500.00 \$1,000.00 \$1,500.00 \$2,500.00 \$1,000.00 \$1,000.00 \$2,500.00 \$2,500.00 \$1,000.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$3,000.00 \$1,000.00		
microwave, 3 game consoles, 3 tablets Line from Schedule A/B: 7.1 3 tvs, 2 computers, printer, dvds, mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets \$2,500.00 100% of fair market value, up to any applicable statutory limit Va. Cod 100% of fair market value, up to any applicable statutory limit	de Ann. § 34-4	
mp3 player, 2 stereos, 5 cellphones, microwave, 3 game consoles, 3 tablets ### 1,565.56 100% of fair market value, up to any applicable statutory limit		
microwave, 3 game consoles, 3 tablets 100% of fair market value, up to any applicable statutory limit	de Ann. § 34-4	
Life from Schedule Arb. 1.1		
Drone \$300.00 ■ \$300.00 Va. Coo	de Ann. § 34-4	
100% of fair market value, up to any applicable statutory limit		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 24 of 68

Debtor 1 Oscar R Romero-Marvez

Debto	or 2 Kimberly A Chan			Case number (if known)	
	rief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Speci portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	aurus PTIII 9mm ine from Schedule A/B: 10.1	\$150.00		\$150.00	Va. Code Ann. § 34-26(4b)
_	ine nom concedency/E. 1911			100% of fair market value, up to any applicable statutory limit	
	vedding ring, 2 wedding bands, ine from Schedule A/B: 12.1	\$15,800.00		\$15,800.00	Va. Code Ann. § 34-26(1a)
_	ine nom <i>Schedule A.B.</i> 12.1			100% of fair market value, up to any applicable statutory limit	
_	Cash ine from Schedule A/B: 16.1	\$150.00		\$150.00	Va. Code Ann. § 34-4
L	ine nom <i>Schedule Alb.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking & Savings: True Energy	\$25.00		\$25.00	Va. Code Ann. § 34-4
_	ine from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	.01(k): Prudential ine from Schedule A/B: 21.1	\$1,887.63		\$1,887.63	Va. Code Ann. § 34-34
_	ine nom <i>Schedule A.B.</i> 21.1			100% of fair market value, up to any applicable statutory limit	
	are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every ■ No			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No	-		·	
	☐ Yes				

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

		Document	Page 2	25 OT 68		
Fill in this information	on to identify you	r case:				
Debtor 1	Oscar R Romero	o-Marvez				
	irst Name	Middle Name	Last Name		-	
	Cimberly A Char					
(Spouse if, filing)	irst Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	EASTERN DISTRICT OF VIRG	INIA (ALEX	(ANDRIA DIVISION)		
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form 1	06D					
		Mho Hoyo Claima	`~~!!"	ad by Dranart		40/45
Schedule D:	Creditors	Who Have Claims S	secure	ea by Propert	<u>y </u>	12/15
		f two married people are filing togethe ut, number the entries, and attach it to				
1. Do any creditors have	e claims secured by	your property?				
□ No. Check this	box and submit th	is form to the court with your other s	schedules.	You have nothing else t	o report on this form.	
Yes. Fill in all o	of the information b	pelow				
	cured Claims					
<u> </u>			r	, Column A	Column B	Column C
for each claim. If more the	han one creditor has	nore than one secured claim, list the cred a particular claim, list the other creditors al order according to the creditor's name	in Part 2. As		Value of collateral that supports this claim	Unsecured portion If any
2.1 American Ho	nda Finance	Describe the property that secures the	ne claim:	\$28,000.00	\$21,500.00	\$6,500.00
Creditor's Name		2018 Honda Civic 11080 mile	s		<u> </u>	
Attn: Bankrup	•	As of the date you file, the claim is: 0	heck all that			
201 Little Fall Wilmington, I		apply.				
		Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as m	nortgage or s	secured		
Debtor 2 only		car loan)	0 0			
■ Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the de	ebtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	☐ Other (including a right to offset)				
community debt						
Date debt was incurred	I	Last 4 digits of account numb	er			
2.2 AmeriCredit/C	3M	Describe the property that secures the	ne claim:	\$47,000.00	\$29,554.00	\$17,446.00
Creditor's Name		2018 Chevrolet Silverado 840				
Attn: Bankrup	otcy	As of the date you file, the claim is: 0	No 1 11 41 4			
Po Box 18385	-	apply.	neck all that			
Arlington, TX		Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who owes the debt?	Check one	Disputed Nature of lien. Check all that apply.				
Debtor 1 only	CHOOK CHO.	☐ An agreement you made (such as m	ortagae or s	ecured		
Debtor 2 only		car loan)	lorigage or c	occurcu		
■ Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the de		☐ Judgment lien from a lawsuit	•			
Check if this claim is community debt		<u> </u>	Automob	ile Loan		
Date debt was incurred	I	Last 4 digits of account numb	er			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 26 of 68

Debtor 1	Debtor 1 Oscar R Romero-Marvez				Case number (if known)		
	First Name	Middle Name	Last Name	_			
Debtor 2	Kimberly A Cha	n					
	First Name	Middle Name	Last Name	_			
Na Na	vy Federal Credit						
	ion	Describe	the property that secures	the claim:	\$4,389.00	\$3,400.00	\$989.00
Cred	ditor's Name	2004 Me	ercedes Benz S430	131000			
		miles					
Att	n: Bankruptcy	As of the	date you file, the claim is	• Chaalrall that			
	Box 3000	apply.	date you file, the claim is	: Check all that			
Me	errifield, VA 22119	☐ Contin	gent				
Num	nber, Street, City, State & Zip	Code Unliqui	dated				
		☐ Dispute	ed				
Who owe	es the debt? Check on	e. Nature of	lien. Check all that apply.				
☐ Debtor	r 1 only	☐ An agr	eement you made (such as	mortgage or	secured		
☐ Debtor	r 2 only	car loa	an)				
■ Debto	r 1 and Debtor 2 only	☐ Statuto	ory lien (such as tax lien, m	echanic's lien)			
☐ At leas	st one of the debtors and	d another	ent lien from a lawsuit				
	cif this claim relates to nunity debt	Other	including a right to offset)	Automol	bile Loan		
Date deb	t was incurred	Las	st 4 digits of account nun	nber			
Add the	dollar value of your e	ntries in Column A on	this page. Write that nur	mher here:	\$79,389	00	
	•		alue totals from all pages				
	nat number here:		and a same of the purpose		\$79,389	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

		Document	Page 2	7 of 68				
Fill in this in	formation to identify your c	ase:						
Debtor 1	Oscar R Romero-	Marvez						
	First Name	Middle Name	Last Name					
Debtor 2	Kimberly A Chan							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States	s Bankruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA (ALEXA	ANDRIA DIVISION)				
Case numbe (if known)	r				Check if this is an amended filing			
	orm 106E/F e E/F: Creditors W	ho Have Unsecured	Claims		12/15			
any executory Schedule G: E: Schedule D: Ci left. Attach the name and case	contracts or unexpired leases to xecutory Contracts and Unexpireditors Who Have Claims Secu	that could result in a claim. Also red Leases (Official Form 106G). I ired by Property. If more space is e. If you have no information to re	list executory o Do not include needed, copy t	Part 2 for creditors with NONPRIORITY ontracts on Schedule A/B: Property (O any creditors with partially secured cla he Part you need, fill it out, number the do not file that Part. On the top of any a	fficial Form 106A/B) and on ims that are listed in entries in the boxes on the			
1. Do any cr	editors have priority unsecured	I claims against you?						
■ No. Go	to Part 2.							
☐ Yes.								
Part 2:	st All of Your NONPRIORIT	Y Unsecured Claims						
3. Do any cr	editors have nonpriority unsec	ured claims against you?						
☐ No. Yo	u have nothing to report in this pa	art. Submit this form to the court with	your other sche	edules.				
Yes.								
unsecured	I claim, list the creditor separately	for each claim. For each claim lister	d, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out	/ included in Part 1. If more			
					Total claim			
4.1 Acc	eptance Now	Last 4 digits of acc	count number	4993	\$2,238.00			
Attn 5501	riority Creditor's Name 1: Bankruptcy 1 Headquarters Drive 10, TX 75024	When was the deb	t incurred?	Opened 11/18 Last Active 1/29/19	_			
	per Street City State Zip Code	As of the date you	file, the claim i	s: Check all that apply				
Who	incurred the debt? Check one.							
□ De	ebtor 1 only	☐ Contingent						
■ De	ebtor 2 only	☐ Unliquidated						
□ De	ebtor 1 and Debtor 2 only	☐ Disputed						
☐ At	least one of the debtors and ano	ther Type of NONPRIOR						
□ cı	heck if this claim is for a comm	nunity						
debt	e claim subject to offset?	-		ration agreement or divorce that you did n	ot			
■ No	0	☐ Debts to pension	n or profit-sharin	g plans, and other similar debts				
□ Y€	es	Other. Specify	Rental Agre	eement				

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 28 of 68

	or 2 Kimberly A Chan		Case number (if known)	
4.2	Association of Alexandria	Last 4 digits of account number	1055	\$34.99
	Nonpriority Creditor's Name Radiologists PO BOX 79537	When was the debt incurred?		V 3330
	Baltimore, MD 21279 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Bread	Last 4 digits of account number	0457	\$655.00
	Nonpriority Creditor's Name	_	Opened FIOA/19 Leet Active	
	156 Fifth Avenue New York, NY 10010	When was the debt incurred?	Opened 5/04/18 Last Active 11/08/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.4	CCB Credit Services Inc.	Last 4 digits of account number	Q965	\$615.80
	Po Box 272 Springfield, IL 62705	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 29 of 68

Debte	Kimberly A Chan	Case number (if known)						
4.5	Credit One Bank	Last 4 digits of account number	5486	\$235.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873	When was the debt incurred?	Opened 09/19 Last Active 10/04/19					
	Las Vegas, NV 89193 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.6	Express Lanes Nonpriority Creditor's Name	Last 4 digits of account number	4864	\$162.00				
	PO BOX 28148 New York, NY 10087	When was the debt incurred?	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim i						
	Who incurred the debt? Check one.	_						
	☐ Debtor 1 only	Contingent						
	Debtor 2 only	Unliquidated						
	■ Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not					
	_	report as priority claims Debts to pension or profit-sharin						
	■ No □ Yes	Other. Specify						
		. , ,						
4.7	First PREMIER Bank Nonpriority Creditor's Name	Last 4 digits of account number	5054	\$615.00				
	Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 11/18 Last Active 1/30/19					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	T (NONDRIODITY I delta						
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Card	I					

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 30 of 68

Debto	2 Kimberly A Chan	Case number (if known)			
4.8	Genesis FS Card Services	Last 4 digits of account number	\$905.61		
	Nonpriority Creditor's Name PO Box 23039	When was the debt incurred?			
	Columbus, GA 31902-3039 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.9	Inova	Last 4 digits of account number 7239	\$2,373.95		
	Nonpriority Creditor's Name PO BOX 37013 Baltimore, MD 21297	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	□ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Insight Imaging	Last 4 digits of account number 3385	\$2,000.00		
	Nonpriority Creditor's Name				
	10721 Main St Ste. G1	When was the debt incurred?			
	Fairfax, VA 22030	As of the date year file, the plains in Chapter III that apply			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Пол			
	Debtor 2 only	Contingent			
	<u> </u>	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 31 of 68

Debtor 1 Oscar R Romero-Marvez

Lasik Financial	Last 4 digits of account number 3155	\$1,348.0
Nonpriority Creditor's Name 7840 Montgomery Rd Cincinnati, OH 45236	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Lon Operations DBA Bread	Last 4 digits of account number 3385	\$1,000.00
Nonpriority Creditor's Name		
156 Fifth Ave 2nd FIr	When was the debt incurred?	
New York, NY 10010		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ _{No}	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
LVNV Funding/Resurgent Capital	Last 4 digits of account number 4631	\$447.00
Nonpriority Creditor's Name		
C/o Resurgent Capital Services	When was the debt incurred? Opened 12/17	
Greenville, SC 29602 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	·	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Factoring Company Account Capital One Other. Specify N.A.	

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 32 of 68

Debtor Debtor	Oscar R Romero-Marvez Kimberly A Chan		Case number (if known)	
4.1 4	Natiowide Recovery Service	Last 4 digits of account number	6139	\$540.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8005 Cleveland, TN 37320	When was the debt incurred?	Opened 02/18	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Mid-Atlanti	Attorney Kaiser Permanente	
4.1	Natiowide Recovery Service	Last 4 digits of account number	6138	\$80.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8005	When was the debt incurred?	Opened 02/18	
-	Cleveland, TN 37320 Number Street City State Zip Code	As of the date you file, the claim i	e. Chock all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Collection Mid-Atlantic	Attorney Kaiser Permanente	
4.1	Navy FCU Nonpriority Creditor's Name	Last 4 digits of account number	0485	\$4,385.00
	Attn: Bankruptcy Dept Po Box 3000	When was the debt incurred?	Opened 07/13 Last Active 9/11/19	
-	Merrifield, VA 22119 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	agreement or arrefree that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	l	

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 33 of 68

Deb	or 2 Kimberly A Chan	Case number (if known)				
4.1	Navy FCU	Last 4 digits of account number	1447	\$4,371.43		
7	Nonpriority Creditor's Name PO Box 3500 Merrifield, VA 22119	When was the debt incurred?		Ψ-,0111-10		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	\square Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharir	g plans, and other similar debts			
	☐ Yes	<u> </u>				
		— Other. Specify				
4.1 8	Patient First	Last 4 digits of account number	6864	\$30.45		
	Nonpriority Creditor's Name PO BOX 758941 Baltimore, MD 21275	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.1	Double Deceyory		2005	¢729.00		
9	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number		\$728.00		
	Attn: Bankruptcy		Opened 07/18 Last Active			
	120 Corporate Blvd	When was the debt incurred?	7/26/19			
	Norfold, VA 23502 Number Street City State Zip Code	As of the data you file the claim	ion Oh a da all that a said.			
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 2 only Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
		☐ Student loans				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	and the second s			
	■ No	Debts to pension or profit-sharing				
	Yes	■ Other. Specify Bank	Company Account Synchrony			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 34 of 68

Debto	Kimberly A Chan	Case number (if known)	Case number (if known)	
4.2	Progressive Leasing	Last 4 digits of account number 7106	\$3,542.79	
0	Nonpriority Creditor's Name 5651 W Talavi Blvd Glendale. AZ 85306	When was the debt incurred?	Ψο,ο :=:: ο	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.2	Progressive Leasing	Last 4 digits of account number 3385	\$3,542.79	
	Nonpriority Creditor's Name 5651 W Talavi Blvd Glendale, AZ 85306	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.2	Resurgent Capital Services	Last 4 digits of account number 9733	\$689.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred? Opened 6/13/19		
	Greenville, SC 29603 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify 01 Sterling Jewelers Inc Kay		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 35 of 68

	2 Kimberly A Chan	Case number (if known)				
4.2	Resurgent Capital Services	Last 4 digits of account number	3385	\$447.00		
3	Nonpriority Creditor's Name 55 Beattie PI #110 Greenville, SC 29601	When was the debt incurred?		******		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	. □ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.2	Sterling Jewelers/Kay Jewelers	Last 4 digits of account number	1585	\$925.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 375 Ghent Rd	When was the debt incurred?	Opened 06/18 Last Active 7/13/19			
	Akron, OH 44333					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Пол				
		Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure				
	_	☐ Student loans	<u> </u>			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	☐ Obligations arising out of a separation agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Charge Acc				
4.2	Syncb/mattress Discnte	Last 4 digits of account number	1859	\$907.00		
5	Nonpriority Creditor's Name			Ψουου		
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 05/14 Last Active 10/04/19			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other Specify Charge Account				

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 36 of 68

Kimberly A Chan	Case number (if known)		
Synchrony Bank/Care Credit	Last 4 digits of account number	5186	\$2,046.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 01/19 Last Active 8/04/19	. ,
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
Virginia Family Chiropractic	Last 4 digits of account number	2148	\$4,000.00
Nonpriority Creditor's Name 50 S Pickett St #114	When was the debt incurred?		
Alexandria, VA 22304 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
/irginia Family Chiropractic	Last 4 digits of account number	3385	\$6,000.00
50 S Pickett St #114 Alexandria, VA 22304	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 37 of 68

Kimberly A Chan	Case number (if known)	
Washington Orthopaedic & Knee	Last 4 digits of account number 3385	\$8
Nonpriority Creditor's Name 8316 Arlington Blvd	When was the debt incurred?	
Fairfax, VA 22031		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce the report as priority claims	at you did not
No	\square Debts to pension or profit-sharing plans, and other similar debt	S
☐ Yes	■ Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	45,664.81
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	45,664.81

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

		D O O O O I I I C	116 1 000 00 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Oscar R Romero-	Marvez		
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly A Chan			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA (ALEXANDRIA DIVISI	ON)
Case number (if known)				☐ Check if this is an
,				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5	City		Olalo	ZII OOGC	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main

Ou	.50 15 10055 Kink	Docume	ent Page 39 of	f 68	00.20	Jese Mani
Fill in this in	formation to identify your					
Debtor 1	Oscar R Romero-	Marvez				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Kimberly A Chan First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA (ALEXANDI	RIA DIVISION)		
Case number						
(if known)					_	Check if this is an mended filing
Official F	Form 106H					
	le H: Your Cod	ebtors				12/15
eople are fili ill it out, and	e people or entities who al ing together, both are equa number the entries in the nd case number (if known)	ally responsible for supp boxes on the left. Attacl	olying correct information the Additional Page to	on. If more space is r	needed, copy	the Additional Page,
1. Do you	u have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	as a codebtor.		
■ No □ Yes						
Arizona,	the last 8 years, have you California, Idaho, Louisiana, o to line 3.	Nevada, New Mexico, Pu	erto Rico, Texas, Washir			territories include
3. In Colum	nn 1, list all of your codebt again as a codebtor only i 6D), Schedule E/F (Official	ors. Do not include your	spouse as a codebtor tor or cosigner. Make s	ure you have listed t	he creditor o	on Schedule D (Official
	Jumn 1: Your codebtor ne, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule		om you owe the debt
3.1				☐ Schedule D, lir	ie	
Nan	ne			☐ Schedule E/F,☐ Schedule G, lir	line	_
Nur	nber Street			- Ochicadic C, iii		<u> </u>
City		State	ZIP Code			
3.2				☐ Schedule D, lir	ne	
Nan	ne			☐ Schedule E/F,☐ Schedule G, lir	line	
Nur	nher Street			– Ochedule G, III		_

State

City

ZIP Code

Fill in this informati	ion to identify your case:	
Debtor 1	Oscar R Romero-Marvez	
Debtor 2 (Spouse, if filing)	Kimberly A Chan	
United States Banl	kruptcy Court for the: EASTERN DISTRICT OF VIRGINIA (ALEXANDRIA DIVISION)	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official For	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 2 or non-filing spouse **Debtor 1** information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Asphalt Foreman Dental Office Mgr** Include part-time, seasonal, or Employer's name **Richard Peyser DDS** VA Paving Co self-employed work. **Employer's address** Occupation may include student 14500 Avion Pkwy Ste 310 2251 Pimmit Dr #C4 or homemaker, if it applies. Chantilly, VA 20151 Falls Church, VA 22043 How long employed there? 4.5 yrs 2018

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or

			•	-or Debtor 1		filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	5,096.00	\$	5,416.67
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	5,096.00	\$_	5,416.67

Official Form 106I Schedule I: Your Income page 1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 41 of 68

5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. No.00 S. 0.00 5d. Required repayments of retirement fund loans 5d. No.00 S. 0.00 5d. No.00 S.	0101	Kimberly A Chan		Case r	number (<i>if kn</i>	nown)			
Copy line 4 here				For	Debtor 1				
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Q.000 \$ 0.0. 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 0.0. 5e. Insurance 5e. \$ 641.00 \$ 0.0. 5g. Union dues 5g. \$ 0.00 \$ 0.0. 5g. Union dues 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,755.00 \$ 1,391.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,755.00 \$ 1,391.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,341.00 \$ 4,025.60 8a. Net income regularly received: 8a. Net income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly line income. 8a. \$ 0.00 \$ 0.0 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.0 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.0 10. \$ 3,341.00 \$ 4,025.67 \$ 5 0.0 11. ** 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Specify: 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line	Copy	y line 4 here	4.	\$	5.096	5.00		5,416.67	
5a. Tax, Medicare, and Social Security deductions 5a. \$ 962.00 \$ 1,391.0				· —			· —		-
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.00 \$ 0.0 5d. Required repayments of retirement fund loans 5d. S 0.00 \$ 0.0 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ 0.0 5g. Union dues 5g. Union dues 5g. \$ 0.00 \$ 0.0 6h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,755.00 \$ 1,391.0 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,341.00 \$ 4,025.6 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add line 7 + line 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.0			_	•			•		
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of sol. O.O. 5d. Domestic support obligations 5d. Required repayments of retirement fund loans 5d. Required repayments of the fund loans 5d. Required repayments of the fund loans 5d. Union dues 5d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,755.00 \$ 1,391.0 7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,341.00 \$ 4,025.6 8d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.0 8c. Social Security 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.0 8c. Social Security 8d. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8d. \$ 0.00 \$ 0.0 8d. Social Security 8d. \$ 0.00 \$ 0.0 8d.		•							_
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12 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income	Include other Do no	ide contributions from an unmarried partner, members of your household, y r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are i	our depen		•			_	0.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	Write	e that amount on the Summary of Schedules and Statistical Summary of Ce						12. \$	7,366.67
mont									y income
 13. Do you expect an increase or decrease within the year after you file this form? ■ No. □ Yes. Explain: 		No.	orm?						

Fill	in this informa	ition to identify yo	ur case:			l			
Deb		Oscar R Rom		vez		Ch	eck if this	s is:	
				··-			An am	ended filing	
	ouse, if filing)	Kimberly A C	han						wing postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the:		RN DISTRICT OF VIRGIN NDRIA DIVISION)	IA		MM / E	DD / YYYY	
1	e number nown)								
		rm 106J							
-		J: Your E							12/1
info	ormation. If maker (if known the description)	ore space is nee n). Answer ever ribe Your Housel	eded, atta y question	If two married people ar ch another sheet to this n.					
1.	Is this a joir								
	□ No. Go to	o line 2. es Debtor 2 live in	n a sonar	ata housahold?					
	■ res. boe		ii a sepai	ate nousenoid:					
		-	t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.		
2.		e dependents?	_	, , ,					
۷.	Do not list D Debtor 2.	•	□ No ■ Yes.	Fill out this information for each dependent	Dependent's relati		De age	pendent's	Does dependent live with you?
	Do not state	the							□ No
	dependents				Son		11		■ Yes
									□ No
									□ Yes □ No
									☐ Yes
									□ No
3.		penses include f people other th	nan	No					☐ Yes
	yourself and	d your depender	nts? ⊔	Yes					
Par		ate Your Ongoir							
exp				uptcy filing date unless y y is filed. If this is a supp					
the		h assistance and		government assistance it luded it on Schedule I: Y				Your exp	enses
,		,							
4.		or home ownersh and any rent for the		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$		1,350.00
	If not include	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	•	rty, homeowner's				4b.			0.00
		maintenance, repowner's associati				4c. 4d.	·		0.00 0.00
5.				our residence, such as ho	me equity loans	4u. 5.			0.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 43 of 68

	scar R Romero-Marvez	Casa num	har (if knaven)	
EDIOI Z K	imberly A Chan	case num	ber (if known)	
Utilities	:			
6a. El	lectricity, heat, natural gas	6a.	\$	175.00
6b. W	ater, sewer, garbage collection	6b.	\$	75.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. O	ther. Specify: Cellphones	6d.	\$	320.00
In	iternet		\$	100.00
С	able/internet/Phone		\$	92.00
Food ar	nd housekeeping supplies	7.	\$	1,200.00
Childca	re and children's education costs	8.	\$	600.00
Clothing	g, laundry, and dry cleaning	9.	\$	110.00
7	al care products and services	10.	\$	0.00
	and dental expenses	11.		30.00
	ortation. Include gas, maintenance, bus or train fare.		Ť	
	nclude car payments.	12.	\$	460.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charital	ble contributions and religious donations	14.	\$	80.00
Insuran	•		·	
Do not in	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Li	fe insurance	15a.	\$	0.00
15b. H	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	374.00
15d. O	ther insurance. Specify:	15d.	\$	0.00
Taxes.	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	, , ,	16.	\$	0.00
Installm	ent or lease payments:			
17a. C	ar payments for Vehicle 1	17a.	\$	965.00
17b. Ca	ar payments for Vehicle 2	17b.	\$	195.00
17c. O	ther. Specify: Third Car payment	17c.	\$	565.00
	ther. Specify: Bob's Furniture	17d.	\$	200.00
	yments of alimony, maintenance, and support that you did not report as		· —	
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ayments you make to support others who do not live with you.		\$	90.00
Specify:	Parents	19.		
	eal property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20a. M	ortgages on other property	20a.	\$	0.00
20b. R	eal estate taxes	20b.	\$	0.00
20c. Pr	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. M	aintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	omeowner's association or condominium dues	20e.	\$	0.00
Other: 9	Specify: Gym fee	21.	+\$	21.00
Pet	, <u>,,,,,,,</u>		+\$	80.00
				33.33
	te your monthly expenses			
	d lines 4 through 21.		\$	7,182.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	7,182.00
				·
	te your monthly net income.		Φ.	
	opy line 12 (your combined monthly income) from Schedule I.	23a.	· -	7,366.67
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	7,182.00
00- 0	whereast your monthly over once from your monthly to you			
	ubtract your monthly expenses from your monthly income.	23c.	\$	184.67
Ir	ne result is your monthly net income.	200.		
For exam	expect an increase or decrease in your expenses within the year after you ple, do you expect to finish paying for your car loan within the year or do you expect your ion to the terms of your mortgage?			ease or decrease because of a
■ No.				
П Уес	Explain here:			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 44 of 68

						_	
Fill in this inforr	mation to identify your	case:					
Debtor 1	Oscar R Romero-	Marvez					
	First Name	Middle Name	Las	t Name			
Debtor 2	Kimberly A Chan						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA	(ALEX	(ANDRIA DIVISION)		
Case number							
(if known)						☐ Check if this is an amended filing	ı
If two married pe You must file this	eople are filing togethers	n connection with a bankr	sible for s	upplyii	ng correct information. edules. Making a false sta	atement, concealing property 000, or imprisonment for up t	
Sign	n Below						
Did you pay	y or agree to pay some	one who is NOT an attorn	ey to help	you fil	II out bankruptcy forms?		
☐ Yes. N	Name of person					ankruptcy Petition Preparer's No on, and Signature (Official Form	
	Ity of perjury, I declare e true and correct.	that I have read the sumn	nary and s	chedu	les filed with this declara	tion and	
X /s/ Osc	ar R Romero-Marve	7	Y	/e/ Ki	imberly A Chan		
	R Romero-Marvez	<u>-</u>	^		perly A Chan		
	re of Debtor 1				ture of Debtor 2		
Date (October 25, 2019			Date	October 25, 2019		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 45 of 68

Fill in this infor	mation to identify your	case:		
Debtor 1	Oscar R Romero-	Marvez		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Kimberly A Chan First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF VIRGINIA (ALEXANDRIA DIVISION)	
Case number				
(if known)				Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Chap	ter 7 12/15
	lividual filing under cha ve claims secured by yo	-	ll out this form if:	
You must file th	ever is earlier, unless th	ithin 30 days after	not expired. you file your bankruptcy petition or by the date le time for cause. You must also send copies to	
	eople are filing together	in a joint case, bo	oth are equally responsible for supplying correct	t information. Both debtors must
	and accurate as possib our name and case num		s needed, attach a separate sheet to this form. C	on the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
	reditor and the property the	hat is collateral	What do you intend to do with the property th secures a debt?	nat Did you claim the property as exempt on Schedule C?
Creditor's	American Honda Fina	nce	Surrender the property.	□ No
	f 2018 Honda Civic	11080 miles	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	■ Yes
property		11000 miles	Retain the property and [explain]:	
securing debt	i:		Retain and maintain payments	
Creditor's	AmeriCredit/GM Finar	noial	□ O	□No
name:	Americi edit/OW 1 mai	ICIAI	☐ Surrender the property.☐ Retain the property and redeem it.	□ NO
Description of	f 2018 Chevrolet Sil	verado 8400	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	miles		Retain the property and [explain]:	
securing debt	:: -		Retain and maintain payments	
Creditor's	Navy Federal Credit U	Inion	☐ Surrender the property.	□No
name:	y . ouo.u. o.ouit o		Retain the property and redeem it.	□ 140
Description of		nz S430	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	131000 miles		Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 46 of 68

	car R Romero-Marvez mberly A Chan	Case number (if known)	
securing del	ot:	Retain and maintain payments	-
For any unexp in the informat	ion below. Do not list real estate leases. Un	in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe you	unexpired personal property leases		Will the lease be assumed?
Lessor's name Description of Property:			□ No □ Yes
Lessor's name Description of Property:			□ No
Lessor's name Description of Property:			□ No
Lessor's name Description of Property:			□ No
Lessor's name Description of Property:			□ No
Lessor's name Description of Property:			□ No □ Yes
Lessor's name Description of Property:			□ No
Part 3: Sign	Below		
	of perjury, I declare that I have indicated my s subject to an unexpired lease.	y intention about any property of my estate that sec	ures a debt and any personal
Oscar R	r R Romero-Marvez Romero-Marvez of Debtor 1	X /s/ Kimberly A Chan Kimberly A Chan Signature of Debtor 2	

Date

Date

October 25, 2019

October 25, 2019

Case 19-13595-KHK

Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26

Desc Main

Document Page 47 of 68

United States Bankruptcy Court

Eastern District of Virginia (Alexandria Division)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 1,380.00
	Prior to the filing of this statement I have received \$ 1,380.00
	Balance Due
2.	\$335.00 of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	\blacksquare Debtor \square Other (specify)
4.	The source of compensation to be paid to me is:
	$\blacksquare \text{Debtor} \Box \text{Other} (specify)$
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed:

Providing Trustee with verification of income and other relevant information prior to the 341 Meeting of Creditors. Representation of Debtor(s) at the 341 Meeting of Creditors. The above disclosed fee for legal services is a minimum amount for the client to pay.

All fees to be paid through the Chapter 13 plan, including those pursuant to fee applications, shall be paid forthwith as a priority administrative claim before payments to secured and unsecured claims.

The hourly rate for attorney(s) is/are \$300 & paralegal(s) is/are \$130.

In the US Bankruptcy Court for the District of Columbia, upon confirmation, counsel will file a fee application with the Court and the amount already paid will be subtracted from the total amount due based on the above stated hourly rate for attorney(s) and paralegal(s) plus expenses. Thus in this jurisdiction, my legal services will be rendered until confirmation within the boundaries of the above stated fee structure.

When allowed by local rules, counsel may request a flat fee from the client(s) for additional work performed instead of an hourly billing. Here if local rules require, counsel shall hold said fees in escrow and file a fee application with the court to permit the disbursement of such fees. When applicable, an application for fees shall be filed with the court pursuant to local rules. Such fees shall be paid forthwith as a priority administrative claim before secured or unsecured claims. If any fees are to paid through a Chapter 13 plan, such monies are part of the total retainer and not excused simply by non-payment by the Chapter 13 Trustee. Client(s) authorize Tommy Andrews, Jr., P.C. to file a proper motion for fees earned even if the Chapter 13 plan was not confirmed. Hourly billing begins when client(s) first meet with counsel or any member of the firm.

Except as noted above, the fee and original retainer is an estimate and is in no way considered a flat fee.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 48 of 68

Counsel may withdraw as attorney of record if, for example, the client(s) does not pay counsel's bill, fails to follow attorney's advice, and/or instructions, misrepresents any fact or withhold evidence, engages in criminal or fraudulent activity upon any tribunal.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

RE: CASES FILED IN US BANKRUPTCY COURTS IN VA & DC: Except as noted above, this retainer does not include representation of Debtor(s) at the confirmation hearings; negotiations with parties concerning confirmation. Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. Representation of the debtors in any dischargeability actions, judicial lien avoidances, other lien avoidances, motions for redemption, relief from stay actions or any other adversary proceeding, appeals, matters unlike the regular practice of law. Representation in any of these stated or unstated matters will require a separate retainer and will be billed at an hourly rate of \$300 for attorney and \$130 for paralegals (or, in the alternative, as permitted by local rules or court practice, a flat fee maybe established under a subsequent retainer). When applicable, an application for fees shall be filed with the court pursuant to local rules. Such fees shall be paid forthwith as a priority administrative claim before secured or unsecured claims. Represention ends on dismissal of case

RE: CASES FILED IN US BANKRUPTCY COURT FOR DC: In Chapter 7 cases, representation shall continue to the date of discharge (or denial of discharge) and excludes any adversary proceedings. In Chapter 13 cases, representation shall continue until the earlier of either 120 days after the entry of an order confirming the plan or dismissal of the case and expiration of the time for seeking enlargement of time for taking an appeal. After said time or occurance of event counsel shall not represent client(s).

RE: CASES FILED IN US BANKRUPTCY COURT FOR THE DISTRICT OF MD: In Chapter 7 cases, representation shall continue to the date of discharge (but continue as to any matter pending at the time of the discharge) (or denial of discharge) and excludes any adversary proceedings. In Chapter 13 cases, representation shall continue until the earlier of 10 days after the entry of an order of dismissal of the case, or in the alternative, Counsel, after 90 days from the entry of an order confirming the plan, may move the court to grant counsel's withdrawal as attorney of record. Local Bk Rule 9010-5 provides (unlike Chapter 7 cases) Counsel in Chapter 13 cases does represent Debtor(s) in Adversary cases.

/-/ T---- A--- |-- VA D--#

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Ctober 25, 2019		/S/ Tommy Andrews, Jr. VA Bar #	
ate		Tommy Andrews, Jr. VA Bar # 28544	
		Signature of Attorney	
		Tommy Andrews, Jr., P.C.	
		Name of Law Firm	
		122 North Alfred Street	
		Alexandria, VA 22314	
		703.838.9004	
October 25, 2019	Signature	/s/ Oscar R Romero-Marvez	
		Oscar R Romero-Marvez	
		Debtor	
October 25, 2019	Signature	/s/ Kimberly A Chan	
		Kimberly A Chan	
		Joint Debtor	
	October 25, 2019	October 25, 2019 Signature	Tommy Andrews, Jr. VA Bar # 28544 Signature of Attorney Tommy Andrews, Jr., P.C. Name of Law Firm 122 North Alfred Street Alexandria, VA 22314 703.838.9004 October 25, 2019 Signature Signature Signature /s/ Oscar R Romero-Marvez Oscar R Romero-Marvez Debtor October 25, 2019 Signature /s/ Kimberly A Chan Kimberly A Chan

0-1-1---05 0040

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this infor	rmation to identify your case:		Ch	ook on	a hay anly an d	rootod	in this form one	in Form
Debtor 1	Oscar R Romero-Marvez			eck on 2A-1Su		rectea	in this form and	in Form
Debtor 2	Kimberly A Chan			□ 1. T	here is no presi	umption	n of abuse	
(Spouse, if filing)				■ 2. T	he calculation t	o deter	mine if a presur	nption of abuse
United States	Bankruptcy Court for the: Eastern District of (Alexandria Division)	•		á		nade ur	nder <i>Chapter 7 i</i>	•
Case number (if known)							ot apply now be e but it could ap	
				□ Ch	eck if this is a	n ame	nded filing	
	Form 122A - 1							
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	om	е			10/19
attach a separat case number (if qualifying milita	and accurate as possible. If two married people a se sheet to this form. Include the line number to w known). If you believe that you are exempted froi rry service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	ipplies. se you	On the top of ar	ny addit narily c	ional pages, writ onsumer debts o	e your name and r because of
1. What is	your marital and filing status? Check one or	ily.						
☐ Not m	narried. Fill out Column A, lines 2-11.							
■ Marri	ed and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.				
☐ Marrie	ed and your spouse is NOT filing with you.	You and your s	spouse are:					
☐ Liv	ing in the same household and are not lega	lly separated.	Fill out both Co	lumns	A and B, lines 2	2-11.		
pe	ing separately or are legally separated. Fill on nalty of perjury that you and your spouse are long apart for reasons that do not include evadir	egally separated	d under nonban	kruptc	y law that applie	s or th		
101(10A). Fo the 6 months	erage monthly income that you received from all rexample, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh Aug de any i	ust 31. If the amo	ount of yore than	our monthly incom once. For examp	ne varied during le, if both
·		· ,	, ,	Colum		Debt	mn B or 2 or filing spouse	
	oss wages, salary, tips, bonuses, overtime, eductions).	and commissio	ons (before all	\$	5,096.00	\$	4,685.00	
3. Alimony	and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you of from an u and room	unts from any source which are regularly par ryour dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depender	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inco	me from operating a business, profession,							
_			otor 1					
	ceipts (before all deductions)	\$ 0.00 -\$ 0.00						
•	and necessary operating expenses thly income from a business, profession, or family		Copy here ->	\$	0.00	\$	0.00	
	me from rental and other real property	пф <u></u>	оору пого и	Ψ		Ψ		
J. NEL IIICO	me nom remarand other real property	Deb	otor 1					
Gross red	ceipts (before all deductions)	\$ 0.00						
	and necessary operating expenses	-\$ 0.00						
•	hly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	
7. Interest,	dividends, and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 54 of 68

ebtor 2 _	Kimberiy A Chan			Case number	r (<i>it known</i>)		
				Column A Debtor 1		Column B Debtor 2 o non-filing	
8. Uner	nployment compensation			\$	0.00	\$	0.00
the S	ot enter the amount if you contend that the amoun ocial Security Act. Instead, list it here:		it under				
	r you \$	0.	00				
	r your spouse \$		00				
bene not ir Unite disak pay p does	ion or retirement income. Do not include any are fit under the Social Security Act. Also, except as sociude any compensation, pension, pay, annuity, of States Government in connection with a disability, or death of a member of the uniformed service aid under chapter 61 of title 10, then include that not exceed the amount of retired pay to which your ed under any provision of title 10 other than chap	stated in the next sente or allowance paid by the ity, combat-related inju- ces. If you received any pay only to the extent to u would otherwise be e	nce, do e ry or retired hat it	\$	0.00	\$	0.00
Do n recei dome Unite disat	ne from all other sources not listed above. Spect include any benefits received under the Social street as a victim of a war crime, a crime against hus estic terrorism; or compensation, pension, pay, and States Government in connection with a disability, or death of a member of the uniformed services on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid ity, combat-related inju	or d by the ry or				
	•			\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
	ulate your total current monthly income. Add lincolumn. Then add the total for Column A to the total for Column B to the t	otal for Column B.	\$	5,096.00	+ \$ _	4,685.00	Total current monthly income
	ulate your current monthly income for the year						
	Copy your total current monthly income from line	·		Сор	y line 11	nere=>	\$9,781.00
	Multiply by 12 (the number of months in a year)						x 12
12b.	The result is your annual income for this part of th	ne form				12b	117,372.00 S
13. Calc	ulate the median family income that applies to	you. Follow these step	os:				
Fill in	the state in which you live.	VA					
Fill in	the number of people in your household.	3					
To fir	the median family income for your state and size and a list of applicable median income amounts, go is form. This list may also be available at the bank	online using the link s	pecified i	n the separa	ate instruc	13. tions	\$91,781.00
14. How	do the lines compare?						
14a.	☐ Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, ch	eck box	1, There is i	no presun	nption of abus	se.
14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined b	y Form 122A-2.
art 3:	Sign Below						
	By signing here, I declare under penalty of perjury	that the information or	n this sta	tement and	in any att	achments is t	rue and correct.
)	/ /s/ Oscar R Romero-Marvez	x /	s/ Kimb	erly A Ch	an		
	Oscar R Romero-Marvez Signature of Debtor 1			y A Chan e of Debtor 2			

Oscar R Romero-Marvez

Debtor 1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 55 of 68

Debtor 1 Debtor 2	Oscar R Romero-Marvez Kimberly A Chan		Case number (if known)	
Da	October 25, 2019 MM / DD / YYYYY	Date	October 25, 2019 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this f	orm.		

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 56 of 68

Debtor 1	Oscar R Romero-Marvez	Check the appropriate box as directed in lines 40 or 42:
Debtor 2 Spouse, if fil	Kimberly A Chan	According to the calculations required by this Statement:
, ,	Eastern District of Virginia Bankruptcy Court for the: (Alexandria Division)	■ 1. There is no presumption of abuse.
Case number if known)	r	☐ 2. There is a presumption of abuse.
, , , , , ,		☐ Check if this is an amended filing
	Form 122A - 2 r 7 Means Test Calculation	04/1

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1	Determine Your Adjusted Income					
ı. C	Copy your total current monthly income.	Copy line 11 from 0	Official Form 122	A-1 here=>	\$	9,781.00
	Did you fill out Column B in Part 1 of Form 122A-1?					
	☐ No. Fill in \$0 for the total on line 3.					
ı	Yes. Is your spouse Filing with you?					
	☐ No. Go to line 3.					
	■ Yes. Fill in \$0 for the total on line 3.					
3. <i>A</i>	Adjust your current monthly income by subtracting a nousehold expenses of you or your dependents. Follo	ny part of your spouse ow these steps:	's income not us	ed to pay for the		
	On line 11, Column B of Form 122A–1, was any amount expenses of you or your dependents?	of the income you reporte	ed for your spouse	NOT regularly use	ed for the ho	ousehold
ı	No. Fill in 0 for the total on line 3.					
	\square Yes. Fill in the information below:					
	State each purpose for which the income was u	ısed	Fill in the amoun	t you		
	For example, the income is used to pay your spous support other than you or your dependents.	se's tax debt or to	are subtracting f your spouse's in	rom		
		\$				
		\$				
				-		
			0.00	=		
	Total.		0.00	-		
				Copy total here=	:> \$ _	0.00
. 4	Adjust your current monthly income. Subtract line 3 for	rom line 1.			\$	9,781.00

Official Form 122A-2

	Case 19-13595-KHK Doc 1 Filed Document	I 10/31/19 Entered 10/31/19 00:58:26 Desc Main ment Page 57 of 68			
ebtor 1 ebtor 2	Oscar R Romero-Marvez Kimberly A Chan	Case number (if known)			
art 2:	Calculate Your Deductions from Your Income				
to an		ocal Standards for certain expense amounts. Use these amounts ndards, go online using the link specified in the separate vailable at the bankruptcy clerk's office.			
your	actual expenses if they are higher than the standards. D	of your actual expense. In later parts of the form, you will use some of o not deduct any amounts that you subtracted fro your spouse's nat you subtracted from in income in lines 5 and 6 of form 122A-1.			
If you	ir expenses differ from month to month, enter the average	ge expense.			
Wher	never this part of the from refers to you, it means both you	ou and your spouse if Column B of Form 122A-1 is filled in.			
5.	The number of people used in determining your ded	uctions from income			
	Fill in the number of people who could be claimed as explus the number of any additional dependents whom you the number of people in your household.				
Natio	onal Standards You must use the IRS Nationa	I Standards to answer the questions in lines 6-7.			
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and				
	7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are under 65 and people who are 65 or olderbecause older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.				
Peop	ole who are under 65 years of age				
	7a. Out-of-pocket health care allowance per person	\$55.00_			
	7b. Number of people who are under 65	X 3 _			
	7c. Subtotal. Multiply line 7a by line 7b.	\$165.00 Copy here=> \$165.00			
Peop	ole who are 65 years of age or older				
	7d. Out-of-pocket health care allowance per person	\$ <u>114.00</u>			
	7e. Number of people who are 65 or older	X 0			

\$_____0.00

Copy here=> +\$ 0.00

Copy total here=>

165.00

7f. **Subtotal.** Multiply line 7d by line 7e.

7g. Total. Add line 7c and line 7f

165.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 58 of 68

Debtor 1 Debtor 2 Oscar R Romero-Marvez Kimberly A Chan

Case number (if known)

Local Standards	You must use the IRS Local Standards to answer the questions in lines 8-15.	
------------------------	---	--

		n information fron tcy purposes into	n the IRS, the U.S. Truste two parts:	e Program	has divided	the IRS L	₋ocal Standa	ard for hou	using for		
-	lousi	ng and utilities -	Insurance and operating	expenses							
■ H	lousi	ng and utilities -	Mortgage or rent expense	es							
To a	answ	er the questions i	n lines 8-9, use the U.S. 1	Trustee Pro	gram chart.						
			using the link specified in the lable at the bankruptcy cler		instructions fo	or this for	m.				
8.			- Insurance and operating ted for your county for insu								733.00
9.	Hou	sing and utilities	- Mortgage or rent expen	ses:							
	9a.		r of people you entered in li inty for mortgage or rent ex					\$	2,587.00		
	9b.	Total average mo	nthly payment for all mortg	ages and ot	her debts sec	ured by y	our home.				
			otal average monthly paym to each secured creditor in nen divide by 60.								
		Name of the cred	itor		Average mo payment	nthly					
		-NONE-			\$						
			Total average monthly p	ayment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	
	9c.	Net mortgage or r	ent expense.								
			total average monthly paym If this amount is less than \$				\$	2,587.0	Copy here=>	. \$	2,587.00
10.			J.S. Trustee Program's di n of your monthly expens					g is incorr	ect and	\$	0.00
	Ex	plain why:									
11.	Loc	al transportation	expenses: Check the num	ber of vehic	les for which	you claim	an ownersh	ip or opera	iting expense		
		. Go to line 14.									
	□ 1	. Go to line 12.									
	2 2	or more. Go to lin	e 12.								
12.			pense: Using the IRS Loca I in the Operating Costs tha							\$	484.00

Official Form 122A-2

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Mair Document Page 59 of 68

Oscar R Romero-Marvez Debtor 1 Kimberly A Chan Debtor 2 Case number (if known) 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2018 Honda Civic 11080 miles 13a. Ownership or leasing costs using IRS Local Standard..... 508.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **American Honda Finance** 470.83 Repeat this Copy **Total Average Monthly Payment** 470.83 470.83 here => line 33h 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0. expense 37.17 37.17 \$ here => \$ Vehicle 2 **Describe Vehicle 2:** 2004 Mercedes Benz S430 131000 miles 13d. Ownership or leasing costs using IRS Local Standard..... 508.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment **Navy Federal Credit Union** 71.50 Copy Repeat this here amount on line 33c. **Total Average Monthly Payment** 71.50 71.50 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0. expense 436.50 436.50 here => \$ 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public 0.00 Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may

also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 60 of 68

Debtor 1 Debtor 2 Case number (if known)

Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 2,070.00 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 600.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 320.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 8,878.67 \$ 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 61 of 68

Add	itional I	Expense Deductions These are additional	deductio	ns allowed by the	e Means Test.		
		Note: Do not include	any expe	ense allowances	listed in lines 6-24.		
25.	r						
	Health	insurance	\$	641.00			
	Disabili	ity insurance	\$	0.00			
	Health	savings account	+ \$	0.00			
	Total		\$	641.00	Copy total here=>	\$	641.00
	Do you	actually spend this total amount?			I		
		No. How much do you actually spend?					
		Yes	\$				
26.	continu your ho	nued contributions to the care of household of the to pay for the reasonable and necessary care consumed and member of your immediate family we be contributions to an account of a qualified ABLE	and sup ho is una	port of an elderly able to pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	90.00
27.		tion against family violence. The reasonably rof you and your family under the Family Violence					
	By law,	, the court must keep the nature of these expens	ses confi	dential.		\$	0.00
28.	Additional line 8.	onal home energy costs. Your home energy co	osts are i	ncluded in your	insurance and operating expenses on		
		pelieve that you have home energy costs that ar fill in the excess amount of home energy costs.		han the home er	nergy costs included in expenses on line		
		ust give your case trustee documentation of you t claimed is reasonable and necessary.	r actual	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8	tion expenses for dependent children who and 3* per child) that you pay for your dependent chelementary or secondary school.					
		ust give your case trustee documentation of you d is reasonable and necessary and not already a			, ,		
	* Subje	ect to adjustment on 4/01/22, and every 3 years	after that	t for cases begui	n on or after the date of adjustment.	\$	0.00
30.	higher	onal food and clothing expense. The monthly than the combined food and clothing allowances % of the food and clothing allowances in the IRS	s in the II	RS National Star			
		a chart showing the maximum additional allowations for this form. This chart may also be availa					
	You mu	ust show that the additional amount claimed is re	easonab	le and necessary	y.	\$	0.00
31.		uing charitable contributions. The amount the nents to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	80.00
32.		I of the additional expense deductions. es 25 through 31.				\$	811.00

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 62 of 68

Debtor 1
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 5
Debtor 6
Debtor 7
Debtor 7
Debtor 7
Debtor 9
Debtor 1
Debtor 2
Debtor 1
Debtor 1
Debtor 2
Debtor 1
Debtor 2
Debtor 1
Debtor 2
Debtor 3
Debtor 4
Debtor 4
Debtor 4
Debtor 5
Debtor 7
Debtor 7
Debtor 7
Debtor 7
Debtor 7
Debtor 7
Debtor 8
Debtor 9
Deb

Dedu	ctions for Debt Payment									
33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.										
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.									
	Mortgages on your home:					verage monthly syment				
33a.	Copy line 9b here	=> \$	0.00							
	Loans on your first two vehicles:									
33b.	Copy line 13b here			:	=> \$	470.83				
33c.					=> \$	71.50				
33d.	List other secured debts:									
Name	of each creditor for other secured debt	Identify property that secures the debt		Does paymen include taxes insurance?						
				■ No						
	AmeriCredit/GM Financial	2018 Chevrolet Silverado 8400 n	niles	□ Yes	\$	772.00				
-										
				□ No						
=				□ Yes	\$					
				□ No						
				☐ Yes	+\$					
-					٦					
					Copy					
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$_	1,314.33	here=>	\$ 1,314.33	_			
		secured by your primary residence, a velupport or the support of your dependents								
	No. Go to line 35.									
		t pay to a creditor, in addition to the payment sion of your property (called the cure amount information below.								
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount				
-NO	NE-			\$	÷ 60 = \$					
					¬					
					Сору					
		To	tal \$	0.00	total here=>	\$ 0.0	00			
	o you owe any priority claims such a e past due as of the filing date of you	s a priority tax, child support, or alimony or an unique of the same of the sa	that							
	No. Go to line 36.									
	Yes. Fill in the total amount of all of too ongoing priority claims, such as	hese priority claims. Do not include current of those you listed in line 19.	r							
	Total amount of all past-due p	riority claims	\$_	0.00	÷ 60 =	\$0.0	00			

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 63 of 68

Debtor 2	Kimi	berly A Chan		Ca	ise n	number (if known)
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Bas</i> as for this form. <i>Bankruptcy Basics</i> may also be available.	sics spec			
	No.	Go to line 37.				
		Fill in the following information.				
		Projected monthly plan payment if you were filing under	r Chapte	er 13	\$	i
		Current multiplier for your district as stated on the list is				
		Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).			Χ	
		To find a list of district multipliers that includes your distinct the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were fil	ing unde	er Chapter 13		\$here=> \$
		of the deductions for debt payment. s 33e through 36.				\$1,314.33_
Total	Deduc	tions from Income				
		f the allowed deductions.				
		e 24, All of the expenses allowed under IRS e allowances	\$	8,878.6	7	
		e 32, All of the additional expense deductions	\$	811.0	0	
		e 37, All of the deductions for debt payment	+\$	1,314.3	3	
		Total deductions	\$	11,004.0	0	Copy total here=> \$11,004.00
Part 3:	Det	ermine Whether There is a Presumption of Abuse				
39. C	alculate	e monthly disposable income for 60 months				
	39a. Co	py line 4, adjusted current monthly income	\$	9,781.0	0	
	39b. Co	py line 38, Total deductions	-\$	11,004.0	0_	
		nthly disposable income. 11 U.S.C. § 707(b)(2). otract line 39b from line 39a	\$	-1,223.0	0	Copy here=>\$ -1,223.00
	For the	next 60 months (5 years)				x 60
	39d. To ʻ	tal. Multiply line 39c by 60	3	39d. \$	-73	73,380.00 Copy here=> \$73,380.00
40. F	ind out	whether there is a presumption of abuse. Check the	box that	t applies:		
•	The I	ine 39d is less than \$8,175*. On the top of page 1 of the	nis form,	check box 1, Th	nere	re is no presumption of abuse. Go to Part 5.
		ine 39d is more than \$13,650*. On the top of page 1 of if you claim special circumstances. Go to Part 5.	f this forn	m, check box 2,	The	nere is a presumption of abuse. You may fill out
	The I	ne 39d is at least \$8,175*, but not more than \$13,650	0*. Go to	line 41.		
*;	Subject t	to adjustment on 4/01/22, and every 3 years after that for	or cases	filed on or after	the	e date of adjustment.

Oscar R Romero-Marvez

Debtor 1

Case 19-13595-KHK Doc 1 Filed 10/31/19 Entered 10/31/19 00:58:26 Desc Main Document Page 64 of 68

ebtor 1 ebtor 2		ar R Romero-Marvez berly A Chan	Cas	Case number (if known)					
41.	41a.	Fill in the amount of your total nonpriority unsecured del A Summary of Your Assets and Liabilities and Certain Statist Schedules (Official Form 106Sum), you may refer to line 3b of	tica	l Information	\$x .25	C			
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. \S			\$	Copy here=>	\$		
		Multiply line 41a by 0.25							
25	% of y	ne whether the income you have left over after subtracting rour unsecured, nonpriority debt. e box that applies:	g all	allowed dedu	ctions is enough to pa	ay			
		39d is less than line 41b. On the top of page 1 of this form, op Part 5.	ched	ck box 1, There	is no presumption of al	ouse.			
		39d is equal to or more than line 41b. On the top of page 1 <i>umption of abuse.</i> You may fill out Part 4 if you claim special ci							
Part 4:	Giv	ve Details About Special Circumstances							
		we any special circumstances that justify additional expent alternative? 11 U.S.C. § 707(b)(2)(B).	ses	or adjustment	is of current monthly	income fo	or which there is no		
	10. Go	o to Part 5.							
□ Y		I in the following information. All figures should reflect your aven. You may include expenses you listed in line 25.	eraç	ge monthly expe	ense or income adjustm	ent for ea	ach		
	ne	ou must give a detailed explanation of the special circumstance cessary and reasonable. You must also give your case trustee justments.							
	G	Sive a detailed explanation of the special circumstances			erage monthly expensincome adjustment	se			
	_			\$	s				
				\$	3				
				 \$	3				
	_			\$					
Part 5:	•	In Below gning here, I declare under penalty of perjury that the informat	ion	on this stateme	nt and in any attachme	nte ie trud	and correct		
	•				·	ilis is tiuc	and correct.		
		/ Oscar R Romero-Marvez scar R Romero-Marvez	X	/s/ Kimberly A					
	Si	gnature of Debtor 1		Signature of D	ebtor 2				
Da		Ctober 25, 2019 Day Day D. M. / DD / YYYY	ate	October 25,		_			

ChexSystems
Attn: Consumer Relations
7805 Hudson Rd., Suite 100
Saint Paul, MN 55125

Equifax Check Services PO Box 30272 Tampa, FL 33630-3272

Telecheck Services, Inc. 5251 Westheimer Houston, TX 77056

TransUnion P.O. Box 2000 Chester, PA 19022

Experian 475 Anton Blvd Costa Mesa, CA 92626

Internal Revenue Service - VA Centralized Insolvency P.O. Box 7346 Philadelphia, PA 19101-7346

Virginia Department of Taxatio PO Box 2156 Richmond, VA 23218-2156

Early Warning Services 16552 N 90th St. Scottsdale, AZ 85255

Acceptance Now Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024

American Honda Finance Attn: Bankruptcy 201 Little Falls Dri. Wilmington, DE 19808 AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Association of Alexandria Radiologists PO BOX 79537 Baltimore, MD 21279

Bread 156 Fifth Avenue New York, NY 10010

CCB Credit Services Inc. Po Box 272 Springfield, IL 62705

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Express Lanes PO BOX 28148 New York, NY 10087

First PREMIER Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Genesis FS Card Services PO Box 23039 Columbus, GA 31902-3039

Inova PO BOX 37013 Baltimore, MD 21297

Insight Imaging 10721 Main St Ste. G1 Fairfax, VA 22030 Lasik Financial 7840 Montgomery Rd Cincinnati, OH 45236

Lon Operations DBA Bread 156 Fifth Ave 2nd Flr New York, NY 10010

LVNV Funding/Resurgent Capital C/o Resurgent Capital Services Greenville, SC 29602

Natiowide Recovery Service Attn: Bankruptcy Po Box 8005 Cleveland, TN 37320

Navy FCU Attn: Bankruptcy Dept Po Box 3000 Merrifield, VA 22119

Navy FCU PO Box 3500 Merrifield, VA 22119

Navy Federal Credit Union Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Patient First PO BOX 758941 Baltimore, MD 21275

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

Progressive Leasing 5651 W Talavi Blvd Glendale, AZ 85306

Resurgent Capital Services Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Resurgent Capital Services 55 Beattie Pl #110 Greenville, SC 29601

Sterling Jewelers/Kay Jewelers Attn: Bankruptcy 375 Ghent Rd Akron, OH 44333

Syncb/mattress Discrite Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Virginia Family Chiropractic 50 S Pickett St #114 Alexandria, VA 22304

Virginia Family Chiropractic 50 S Pickett St #114 Alexandria, VA 22304

Washington Orthopaedic & Knee 8316 Arlington Blvd Fairfax, VA 22031